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ABSTRACT

This practicum addressed the problem of families having insufficient skills and resources necessary for locating information about the physical, socioemotional, and academic development of their young children in an early intervention program. The practicum's goal was to help parents acquire these necessary skills and resources. A family resource center was established on a public school campus, including: books, tapes, toys, and other resource material for families to borrow; information about community agencies; a referral telephone line service; and support group and other information sharing activities. Newsletters about community agency services were distributed to teachers to assist them in making appropriate referrals. Analysis of evaluative data showed that parents gained an understanding of how to use acquired information, expressed an increased feeling of support, and cited specific examples when acquired information was useful. Additionally, teachers demonstrated an awareness of appropriate community referrals. Appendices include the Family Needs Survey, other survey forms, and a pretest/posttest regarding developmental appropriateness of materials and services. (Contains 23 references.) (JDD)

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ED 373 501

Enabling Parents Who Seek Information About Child Development and Community Resources To Find Answers Through a School Based Resource Center

by

Mary M. Stowers

Cluster 40

A Practicum II Report Presented to the
Ed.D. Program in Child and Youth Studies
in Partial Fulfillment of the Requirements
for the Degree of Doctor of Education

NOVA UNIVERSITY

1994

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Date of Final Approval of Report Georgianna Lowen, Ed.D.

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ABSTRACT

Enabling Parents Who Seek Information About Child Development and Community Resources To Find Answers Through a School Based Resource Center. Stowers, Mary M. , 1993: Practicum Report, Nova University, Ed. D. Program in Child and Youth Studies. Family Involvement Projects/Parent Education/Resource Centers/Full Service Schools/Teacher Training/Preschool Education/Special Needs Populations

This practicum was designed to address the problem of families seeking specific information about the physical, social-emotional and academic aspects of their child's life but had not acquired the skills and resources necessary for their search to be successful. The major goal of the practicum project was that parents would acquire the skills and resources necessary to obtain the desired information about their children's physical, social-emotional, and academic development.

In order to meet this goal, the writer developed a free standing family resource center on a public school campus which included books, tapes, toys, and other resource material for families to borrow, information about community agencies, a referral telephone line service, and support group and other information sharing activities. Teachers were provided with information about community agencies through newsletters so as to become better informed referral agents. Resource materials and referral information was available to families and teachers without cost.

Analysis of collected data showed that parents gained understanding of how to use acquired information, expressed an increased feeling of support, and cited specific examples that acquired information was useful . Additionally , teachers demonstrated an awareness of appropriate community referrals.

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CHAPTER I

INTRODUCTION

Description of the Community

The work setting of the writer was the program office of the county's public school system's Exceptional Student Education (ESE) Early Intervention Program. The county which this school district serves is a moderately populated suburban and rural area located between two large urban centers. This county is geographically large and the present population is slightly over 400,000. The county's population has grown at a rate of 25% in the past ten years and this growth is predicted to continue. In addition to a large migrant population, with approximately 7% of the children served by the school system living in migrant families, 10% of the county's families live on monthly incomes which are below the poverty level. In general, the per capita income is approximately $14,000.

The county's 106 public schools served 65,667 students during the 1991-1992 school year. During that time, approximately 10,000 of these students received special programming from the special education department of student services. There were 15 special education program options, including services to the physically, sensory, mentally, and emotionally challenged, and programs for the special learner, both learning disabled and gifted, available to meet the students' needs. Special education services, except for the programs for the gifted, were also available for the

preschool aged child. Approximately 300 children, ages 3 to 6, were served in the 28 ESE prekindergarten (Pre-K) and developmental primary (DP) classrooms throughout the county.

Writer's Role

The writer's role was that of mental health therapist who worked with a special population of ESE Pre-k and DP children and their families. This work involved engaging in a therapeutic play relationship with children who were identified on their individualized education plans (IEPs) as likely to benefit from play therapy. The support persons of these children (referred to as "parents" for the remainder of this work), were provided with both information and referral services based on the familial need. Consultation services, regarding meeting the children's emotional needs and addressing behavioral concerns in the classroom, were available to the classroom teacher on a routine basis. Since some children received "mainstreaming" services, which means the children participated in the activities of a regular education classroom for a portion of the school day, consultation with regular education teachers was also provided. In addition to working with children and their parents, evaluation and consultative services were offered to teachers and parents' of children who are classified as "at risk" but who did not meet the diagnostic criteria for a specific special education classification. These services included observations of the children in the natural settings, summaries of the observed relationships and behaviors, recommendations and, if appropriate, referrals to other community agencies. Follow along services, which may include monitoring assistance, additional observations, recommendations, and referrals were provided. At risk preschool children also received transition consultation services upon entrance into kindergarten with parental approval.

An additional responsibility of the writer was to disseminate information and

referral assistance to any parent, regardless of the child's or family's need, who requested this service. Throughout the course of the school year, workshops, conferences, newsletters, and other information sharing channels were provided for parents and teachers on various child development topics, and the writer had varied responsibilities in both the planning and implementation of these training opportunities.

Both the individuals encountered in the work relationship and the responsibilities of the writer were varied and multi-faceted. A summary of these responsibilities is that the writer assisted individuals in ascertaining what skills, resources, and information were needed. Individuals were then assisted to find avenues, such as play therapy, resource sharing, or parent to parent networking, to satisfy their needs.

CHAPTER II

STUDY OF THE PROBLEM

Problem Description

In the work setting described in Chapter I, the writer became aware of a problem which had significant impact on the persons worked with during the course of the work day. This problem was that families seek specific information about the physical, social-emotional and academic aspects of their child's life but had not acquired the skills and resources necessary for their search to be successful. Specifically, families stated that they sought information in five areas, namely, what services are available for their child, how to teach their child, how to handle their child's behavior, what services their child might receive in the future, and information about any condition or disability their child might have.

Since parents did not find the information they sought, they were greatly affected by the problem of not yet acquiring the skills and resources needed to make an information search successful. Their children were also affected by the parents' unsuccessful searches for information because the desired information usually involved improving the child's developmental skills and increasing resources which would benefit the child. Additionally, teachers were affected by the problem because parents, not yet having the skills to search for information and resources, may turn to the teachers for answers but the teachers may not have the time nor the skills to assist

the parents. Additionally, parents who had not acquired the skills and resources needed to find appropriate answers might interact with their children in ways which are developmentally inappropriate and this may make the teacher's work with the children more difficult.

Previous solutions which attempted to address this problem, such as providing parents with resources, giving parents information packets, and offering referral assistance, have often not worked. The primary reason for the lack of success is the philosophical approach professionals used in working with families. Prior to 1990 and the avocation for the family centered approach, families were viewed as "cases" to be "managed". The case management approach resulted in the social service worker doing for the family rather than addressing the issue of how families could acquire the skills and resources they need to locate information and resources. Social service providers disseminated bits and pieces of information they thought would benefit the family rather than evaluating the situation in the family centered context. The result of the case management approach is that the problem, which in brief is that families had not yet acquired the skills and resources needed to locate the information they seek, still existed for many parents.

Problem Documentation

Evidence which supported the existence of the problem described above was collected through the use of the Family Needs Survey (Bailey & Simeonsson, 1988) (see Appendix A) and interviews. The Family Needs Survey was selected because it was rated by parents of special needs children as useful in defining their needs and easy to use (Sexton, Snyder, Rheams, Barron-Sharp, & Perez, 1991). This survey was used with the permission of the author (see Appendix B).

The Family Needs Survey was responded to by 88 of 200 parents of ESE early intervention students who received the survey in May of 1992. These parents

identified their priority service needs as those listed in the category of information. These information areas included issues of child development, how to play with and teach children, how to address behavior issues, and information about special needs.

The survey's instruction is for parents to check "yes" for any item which is an important family issue, "no" for those items which are not, and "not sure" for parents who are uncertain about the importance of an issue. The following table list the parents' responses to the question of need identification in specific areas. Items with the higher numbers in the "yes" column were identified by a larger number of parents as being important to their families.

Table 1

Parental Responses to the Family Needs Survey

Category : Information Question Number	No	Not Sure	Yes	NR*
1 How children grow and develop.	4	2	82	0
2 How to play and talk with my child	4	3	80	2
3 How to teach my child	4	2	82	0
4 How to handle my child's behavior	4	3	80	1
5 Info. recondition or disability my child may have	4	3	80	1
6 Info. re. present services	4	2	82	0
7 Info. re. services child may receive in the future.	4	2	80	2
Category : Family and Social Support				
1 Talking to someone in my family re. concerns	18	12	49	9
2 Having friends to talk to	18	5	55	10
3 Finding time for self	26	11	40	11
4 Helping my spouse	28	6	43	9

accept condition our child might have				
5 Helping our family discuss problems and solutions	21	6	55	6
6 Helping our family support each other during difficult times	18	4	60	6
7 Deciding who will do chores, childcare etc.	30	10	40	8
8 Deciding on and doing recreation activities	23	9	48	8
Category : Financial				
1 Paying for food, housing, medical care, clothing, or transportation.	13	5	61	9
2 Getting special eqt. my child needs	10	8	64	6
3 Paying for therapy, day care, or other services	15	6	62	5
4 Counseling or help getting a job	35	18	37	8
5 Paying babysitters/ respite	31	7	44	6
6 Paying for needed toys	25	9	47	7
Category : Explaining to Others				
1 Explain child's condition to my parents or spouse's parents	34	8	38	7
2 Explain child's condition to siblings	32	4	44	7
3 Knowing how to respond to questions re. my child's condition	31	4	49	4
4 Explaining my child's condition to other children	31	4	49	4
5 Finding reading material about other families who have a	12	5	64	7

child like mine

Category : Child Care				
1 Locating babysitters or respite care who are willing and able	29	7	44	8
2 Locating a day care or preschool for my child	32	4	44	8
3 Getting appropriate care for my child in a church or synagogue during religious services	37	7	36	7
Category : Professional Support				
1 Meeting with a minister, priest, or rabbi	45	14	21	8
2 Meeting with a counselor	29	7	48	4
3 More time to talk to my child's teacher or therapist	17	3	64	4
Category : Community Services				
1 Meeting and talking with parents who have a child like mine	19	6	57	6
2 Locating a doctor who understands my child's needs	17	5	60	6
3 Locating a dentist who will see my child	28	2	50	7

N=88 *= No Response

(Note : In order to save space, some questions have been paraphrased. The exact wording of this survey is available in Appendix A.)

The results of this survey indicated that whereas parents identify services needs in many categories, the greatest number of parents seem to seek information and resources. The question the writer asked, then, is if these parents truly identified an important service need for their families, then why have they not met this need? This

writer speculated that parents would like to meet their need for desired information but they had not acquired the skills and resources necessary to complete their search.

Confirmation of the writer's assumption was requested from the teachers who work with these families on a regular basis, the ESE early intervention program supervisor, and three members of this program's support staff. When 20 teachers were asked if they thought parents and guardians of the children they work with had the skills and resources necessary to be successful in satisfying their need for information, 20 of the interviewed teachers responded "No." In addition, the program supervisor and the three members of the ESE early intervention support staff, when asked if they thought parents had acquired the skills and resources necessary to satisfy their expressed need for information , all responded "No."

Causative Analysis

The writer believed there are six causes for the problem of many parents not yet acquiring the skills and resources needed to conduct a successful search for information. The first cause appeared to be that available information is often decentralized, requiring information seekers to search several diverse sources of information. Parents may not have the skills needed to search out many sources. Conducting searches, aside from requiring skills such as functional reading, requires specific skills such as organization, awareness of alternative sources of information, clear definition of what information is being sought, and assertiveness to continue one's search. Additionally, parents often do not have the resource of time needed to complete a thorough search nor the economic resources necessary to pursue information from many diverse sources.

A second cause of the problem appeared to be that parents may find information which is too difficult to understand without specific training in the subject. Additionally, material which is found may be developmentally inappropriate for

addressing their children's needs. Parents, however, without having acquired some foundation in child development and information about the development versus chronological functioning level of their child, would not possess the skills and resources necessary to evaluate the usefulness of this information.

A third suspected cause for the problem was that agencies which may have the needed information are decentralized. This decentralization results in several difficulties for the information seeker. Perhaps the most obvious problem is that parents often may not have an awareness of these agencies' existence. Those who may be aware of the agency may not have yet acquired information regarding the purpose of this agency and how it could help their family. Parents who had acquired awareness of both the agency's existence and purpose may not have an understanding of how to access this agency. Finally, parents may simply lack the resource of time needed to conduct these searches for information.

A fourth cause of the problem seemed to be that the county's centralized information and referral system is not well publicized. Parents and many professionals seem unaware that information and referral assistance is available. Since parents are unlikely to access the centralized information system, they will often turn to more informal sources of information such as teachers. The informal information and referral networks, however, appeared to be the fifth cause of the problem. Many members of these systems, much like the parents encountered, seemed to have not developed the skills and resources necessary to be effective information seekers, Given this, they could provide only portions of the requested information. Parents, then, were given minimal or inappropriate information. More importantly, the fundamental problem, which was that parents' had not yet acquired the skills and resources needed to be information seekers , was not addressed.

The sixth and final cause of the problem seemed to be that many parents had

not yet developed an awareness of their right to know. The right to know means that parents have free and complete access to testing, (including medical, psychological, and educational testing completed, or to be completed, on their child), records, reports, and any information which has been compiled about their child. Additionally, parents have the right to completely understand any medical, psychological, or educational plan which will be used with their child. Aside from being unaware of the parental right to know, some parents may feel afraid of the perceived expert who has the information and so they will not assert their right to know. Others may be aware of their right but will not know how to assert their right if they face opposition from a professional. Feeling unsupported and frustrated in their attempts to gain access, these parents may simply quit trying.

Relationship to the Problem to the Literature

A review of the literature to determine the relationship of this problem to the work setting was conducted. During the course of this search, a wide variety of topics, including early childhood education, special education, elementary education, social work, counseling and psychology and sociology were explored. This literature review provided evidence for the problem of parents wanting information about their children's development but not having the skills or resources necessary to acquire and utilize this information. Some writers confirmed the existence of the problem while others explored causes for the problems. In this section, both of these aspects of the problem as they were discussed in the reviewed literature, will be presented.

Several reports (Bloch & Seitz,1985;Jeppson, 1988; Smallwood, Hawryluk, & Pierson, 1990;) stated that parents have not acquired the information and support needed to assist their children with learning. These writers further contend that information sharing by professionals is integral for enhancing the children's learning experience. A clear relationship exists between parental assistance and the success

of student learners. However, parents have not yet acquired the skills to effectively give this help to their children .

In addition to the difficulties encountered in finding information, reviewed literature indicated that parents often have difficulty understanding how to utilize the acquired information (Bennett & Algozzine, 1986). This means that successful searchers, that is parents who have acquired the skills necessary to actually find the needed information, may not have developed the skills to use it. In addition to difficulties with information utilization, parents also have difficulty ascertaining the developmental appropriateness of obtained information (Smith, 1986). This can result in parents using information which is not appropriate for their children's developmental level and can result in frustration in the children and the parents.

Also confirmed by reviewed literature was that parents have not developed the ability to locate and access appropriate community resources. Research stated that parents want to access community resources for assistance in meeting the families' needs but are often unaware of what resources are available or appropriate (Bloch & Seitz, 1985). Grippo-Gardner & McHugh (1988) offered additional confirmation by stating that parents are often unfamiliar with the variety of services which are available in a community. Since very few community agencies have shifted from a client centered to a family centered approach, only limited family support and consultation services are available and parents continue to be without the skills needed to access agencies (Mahoney & O'Sullivan, 1990). Parents also acknowledge that they have not acquired the competence needed to address their children's developmental needs and request support in order to develop this competence (Caro & Derevensky, 1991).

The reviewed literature revealed several causes for the problem. A very significant problem seemed to be that parents have not been taught how to find information (Dunst, 1988). As discussed earlier in this paper, finding information

requires specialized skills, and most people have not yet acquired these skills. At best, some parents probably have developed skills in searching for printed information, such as the ability to access a library, but these skills are not sufficient to result in a completely successful information search. In addition, since searches for information can require investigations of many sources, time issues are often barriers to finding desired information and support (Powell, 1991;Smith,1988).

Even parents who have the skills to be effective searchers and the time to conduct a thorough search, may have difficulty ascertaining which information is appropriate for their children's needs (Dunst, 1988). This issue is extremely important, especially in the field of early childhood. Debates regarding developmental appropriateness occur among professionals in the field at present and an individual who is not trained in this field would have great difficulty trying to judge the usefulness of information and materials . Additionally, information and materials may be appropriate for most children of a particular chronological age range, but may be inappropriate for specific children due to developmental ages. Unless parents have an understanding of the difference between the concepts of chronological and developmental ages, and what they mean in relation to their children, acquired information and materials may be useless.

Another significant cause of the problem appeared to be that parents lacked awareness of community resources and no community agency served as a centralized referral source (Mahoney et al. 1990; Muenchow & Shays, 1980). Simply stated, parents didn't know where to go to find answers. Parents will never be able to acquire the skills they need to find information if they have no idea where to begin this process. In addition to not knowing where to begin the search for answers, reviewed literature stated that an additional cause of the problem is that parents are often unaware of their rights to be informed (Innocenti, Rule, & Fiechtl, 1987). This lack of awareness

frequently results in parents feeling intimidated by the professionals they encounter and therefore not requesting the information they seek (Caro & Derevensky, 1991; Smallwood et al. 1990).

A final cause for the problem discussed in the literature is that parents often feel isolated or unsupported in their attempt to find answers (Smith, 1988; Turnbull, 1988). When conducting a search for information, parents, or any information seeker, will find many closed doors and travel down many false paths. These obstacles are typically part of the search process. However, if searchers are not aware that these obstacles are common, and if they lack the resource of support to provide encouragement and advice, feelings of frustration can result. This frustration often translates into parents giving up their search.

CHAPTER III

ANTICIPATED OUTCOMES AND EVALUATION INSTRUMENTS

Goals and Expectations

In order to address the problem examined in the previous chapter, the writer developed a specific goal and outcomes. The following goal and outcomes were projected for this practicum. The writer's goal was that parents will acquire the skills and resources necessary to obtain the desired information about their children's physical, social-emotional, and academic development. The writer expected that by implementation of solution strategies, a significant impact could be made toward reaching this goal. . In order to determine the effects of the solution strategy, projected outcomes were established prior to implementation of the project.

Expected Outcomes

The first projected outcome addressed the cause of parents not knowing where to find specific information. Specifically, this outcome is that of the estimated 50 parents encountered during the problem solving phase of this project, 25 will know with 75% accuracy where to find information on specific topics of interest as measured by a survey of where to locate information (see Appendix C) . The where to locate information survey, which uses an open ended questions format, attempts to determine if parents have developed the concept of where to find specific information on general topics. This questionnaire, developed by the writer, was designed as

presented because it seeks specific resources directed related to the projected outcome.

The second projected outcome addressed the cause of parents not knowing how to use the information which has been acquired. This projected outcome is that 20 encountered parents will exhibit a understanding of how to use 50% of the information they acquire as measured by the survey regarding utilization of acquired information (see Appendix D). This survey, developed by the writer, uses true/false questions in an attempt to ascertain if parents have acquired the skill of how to best use found information. The writer designed these questions are designed to be general in scope rather than information specific so that the skill of information utilization, which is necessary for the use of any information that is found, rather than comprehension of specific information, could be measured.

The third projected outcome is that 30 parents will express an awareness of how to access information and referral services with 75% accuracy as measured by the survey of how to effectively access community resources (see Appendix E). This outcome was developed to address suspected causes for the problem of parents not having the skills to access agencies, having difficulty establishing a network, and unawareness of parental rights. This survey, which uses a true/false format, was prepared by the writer with the intent of measuring generalized knowledge which can be used regardless of the situation rather than knowledge specific to a given situation.

The fourth projected outcome is that 15 parents will provide a specific example of how the obtained information was utilized as measured by the survey of information usage (see Appendix F). This outcome attempted to address the cause of parents having not yet acquired the skills necessary to understand and utilize the information they obtain. The survey of information usage, which uses a checklist to find out how parents obtained information and a brief essay question on how this information was

used, was developed by the writer. This measure was designed in this manner so as to specifically determine how parents used the information they obtained.

The fifth projected outcome of meeting the project's goal addressed the cause of parents not having the skills to determine the appropriateness of information, materials, and programs they successfully locate for use with their child. Specifically, this outcome is that 15 parents will show a 3 point increase in their ability to judge the developmental appropriateness of the materials and services they acquire as measured by the pre and post tests regarding the developmental appropriateness of materials and services (see Appendices G & H). The writer developed this measure , which also uses a true/false format , with support from the literature. Questions regarding the area of play (3,5,6,8,9,10, 12,15, & 16) were based, in part ,on the works of Erikson (1977), Fewell & Vadasy (1983), and Smilansky & Shefatya (1990). Questions which address the developmental appropriateness of preschool education practices (13, 14, & 18) were based in part on the position statement developed by the National Association for the Education of Young Children (1990). Questions regarding appropriate discipline practices (19 & 20) were based in part on the work of Cherry (1983). This measure was designed in this manner because it measured knowledge of developmental appropriateness based on expert opinion. Additionally, colleagues familiar with developmental appropriate practices agreed that this scale appeared valid in terms of content.

The sixth projected outcome addressed the suspected cause of the problem that informal referral sources, such as teachers, appear to have not developed the skills and resources necessary to be effective information seekers and can only provide portions of the requested information. Most importantly, the fundamental problem, which is that parents' have not yet acquired the skills and resources needed to be information seekers , is not addressed. Remediation of this suspected cause will

result in the outcome of 10 informal referral sources, in this case teachers who frequently provide referral information, will demonstrate an awareness of where to refer parents 50% of the time as measured by written survey (see Appendix I). The intent of this outcome was to assist teachers to become accurate sources of referral information so that parents, armed with accurate information, will be more effective information seekers. The outcome measure, an eight item forced choice scale, was developed by the writer.

The seventh projected outcome is that 15 parents will report a 40% increase in their feeling of support of their attempts to exercise their right to know as measured by a survey of perceived increased support regarding right to know issues (see Appendix J). This outcome is the projected result of addressing the cause of parents being unaware of their rights to know and feeling intimidated in their attempts to seek information from professionals . This measure , developed by the writer, solicits parental opinion in a force choice format on an increase of awareness and support they have experienced regarding right to know issues.

Measurement

In brief, the following measurements were projected for this practicum.

1. Of the estimated 50 parents encountered during the problem solving phase of this project, 25 will know with 75%accuracy where to find information on specific topics of interest as measured by a survey of where to locate information.

2. Twenty of these encountered parents will exhibit an understanding of how to use 50% of the information they acquire as measured by a survey regarding the utilization of acquired information.

3. Thirty parents will express an awareness of how to access information and referral services 75% of the time as measured by a survey regarding information utilization.

4. Fifteen parents will provide a specific example of how obtained information was used as measured by the survey of information usage.

5. Fifteen parents will show a 3 point increase in ability to judge developmental appropriateness of the materials and services they acquire as measured by a pre and post survey measure of developmental appropriateness.

6. Ten informal referral sources, in this case teachers who frequently provide referral information, will demonstrate an awareness of where to refer parents 50% of the time as measures by a survey for teachers regarding the referral of parents.

7. Fifteen parents will report feeling a 40% increase in support of their attempts to exercise their right to know as measured by a survey of perceived increased support regarding right to know issues.

CHAPTER IV

SOLUTION STRATEGIES

Discussion and Evaluation of Solutions

The problem addressed by this practicum project was that families seek specific information about the physical, social-emotional and academic aspects of their children's lives but had not acquired the skills and resources necessary for their search to be successful. Other persons who are involved in the lives of families offered solutions designed to address the problem. Bloch and Seitz (1985) described a family exchange center designed to offer families opportunities to find information and support. Activities at this center are varied with the intent of meeting a large variety of parental interests and needs. Freisen, Griesbach, Jacobs, Katz-Leavy,& Olson, (1988), and Muenchow and Shays (1980) also advocated the use of family centers to address the problem. Dryfoos (1991) suggested that schools become a centralized location for the dissemination of a wide variety of family oriented services. Reviewed research stated that parent report these centers are a successful way to address the problem of parents not having acquiring the skills necessary to conduct a successful search for information.

Another program suggestion to address the causes of the problem and bring about successful outcomes for families was the use of informational and supportive meetings. (Goodson, B.D. 1991; Innocenti, M, Rule, S., & Fiechtl, B.J., 1987; Mahoney

& Sullivan, 1990). Parent meetings were suggested in that they are a quick way to provide accurate information to a large group, address a wide array of questions, and encourage both advocacy and networking among group participants.

Other research recommended the problem be addressed on an individualized basis. These solutions range from the use of telephone information and referral services which parents contact with specific needs to weekly home visits which provide both information and training (Smallwood, D.L., Hawryluk, M.K., & Pierson, E. 1990; Caro, P.,& Derevensky, J.L., 1991; Olmstead, P.P., 1991; Turnball, A.P., 1988). Telephone based Information and referral systems were advocated because they are confidential and easy to access. Programs which utilize home training may use professional trainers or be conducted by mentors. Mentors are usually parents who share similar characteristics but have more experience in the area of interest and can provide both information and empathetic support. These programs were said to be successful because they meet family needs on an individual basis.

Another suggested solution to the problem was an information network which provides information and linkage services to all social service agencies in the area (Grippo-Gardner, L. & McHugh, C., 1988; Powell, D.R., 1991). This solution provided one central clearinghouse which has information on all available agencies and will actually act as the contact person between the family and the agency if this service is necessary. In addition to linkage, this network provided on-going consultation with both the parents and the agencies to assure that provided services continue to be appropriate. This networking service was thought to be successful because it also provided a personalized service designed to address family specific needs.

Other possible solutions to the problem exist. One possible solution was the development of a resource and referral guide for teachers to use for referring families to appropriate service agencies and conducting an in-service, both in person and on

videotape, about the effective use of this guide. This would help address the causal situation of informal referral sources providing inappropriate or inadequate information to parents. This idea could also be expanded to include service providers from a variety of agencies. Agency personnel who receive this training could then be linked into some sort of information and referral network.

Another possible solution was to plan and host monthly "info-days" for parents. These programs would feature representatives from various agencies or experts on topics of interest. Each "info day" would focus on a specific topic. In addition to speakers, materials about the specific topic, such as books and videos, would be displayed. Information about agencies which provide services on the topic could also be provided, either in person or through information packets.

The problem's causes could also be addressed through the establishment of a parent to parent network. This network would match a parent who is confident in "right to know" issues with parents who would benefit from empowerment in this area. The matched parent could also provide mentoring in terms of specific development issues and referral services to meet specific family needs.

Printed materials of various topics could also be used to address the problem. Articles about area agencies and support groups could be written for the quarterly newsletter distributed to parents of ESE preschoolers. This would give parents who read information about what services agencies provide and how to access these agencies. Additionally, these articles would let parents know about support groups designed to meet a specific family need. These articles could also be distributed to the administrative staff of local elementary schools for reprinting in their school's newsletter. This would give information to a wider range of families, including families who are considered "at risk" but whose children do not meet criteria for special education services. Methods of information sharing could also be used to disseminate

information about books, toys, teaching activities, cultural opportunities, and local learning fairs which would enhance both the academic and social-emotional growth of preschoolers and kindergarten aged children. This information could be presented in an easy to read format and on video or audio tape for parents who prefer taped information.

All the possible solutions discussed in this proposal seemed likely to have a positive impact on the problem. In order to pick the solutions which would most likely impact the problem in a specific situation, however, the writer needed to critique these solution in the context of the work setting, the population served, and the available resources. The first solution discussed was the family resource center concept which provides a centralized location for families to get information on many issues. The center also provides referrals and support from professionals and other parents. Most importantly, the center is a place where parents define their own needs and select the information and resources they want to address their problems. They can also partake in support and information sharing activities. The focus of family service centers is for parents to acquire the skills needed to be effective information seekers. The center is designed to make information seeking easier and more understandable. The intent is not for center workers to do *for* families what the professionals decide should be done. The writer contended that this solution would work in the work setting for two reasons. The first reason was that both the families and professional staff the writer worked with seem to advocate for a family centered philosophy of service. The service center was an ideal way to begin to offer "family powered" services. Resources, such as physical space, materials, other equipment, and staff involvement, were available for the implementation of a project such as a parent resource center.

The second reason for predicted success was that social services provided through workers in the writer's work setting were provided on an individual family

basis. This method is quickly becoming ineffective due to reduction of staff and the increase of number of families wanting services. Additionally, in this time of economic crisis for the school system, the individualized approach to service is inefficient and difficult to justify. This inefficiency and ineffectiveness of the individualized service approach resulted in a negative critique of the proposed solution of using individual family contact by either professionals or parent mentors. Although these methods are probably very effective in addressing specific family needs, these methods cannot be justified. Resources are simply no longer available to continue individualized services.

The next solution discussed in this proposal was the use of informational and support meetings. The writer believed that these would work to some extent in the writer's work setting . Personnel were willing to either present or facilitate these meetings. Resources such as meeting rooms, materials for dissemination, and session presenters were readily available. Meetings, however, seemed to meet the needs of a small segment of the population. Experience with this population showed that about 1 to 5 percent of the parents will be involved in meetings and seem to have their needs met by this forum. For most parents, however, meetings do not provide enough positive reinforcement to be worth the personal cost of attendance. Meetings would be continued so as to address the needs of those who derive benefit from this format but were best used in combination with other methods. The solution of hosting "info days" can be critiqued as similar to the strategy of using meetings. Again, a small segment of the population would benefit from this format while a majority choose not to participate. Whereas presenting these days seemed to be a good idea and would be tried on a limited basis, this idea probably needed to be used in combination with some other method.

The writer supposed that the solution of a telephone information and referral service would probably work with the previously described population, but also on a

limited basis. This service was supported by the administration and resources to implement this service were available. Information about resources could be obtained and training could be provided to people willing to work with this service. Some families would use this service as often as needed because of the convenience and ease of access. Difficulty would arise in terms of keeping this line staffed for long periods of time. Additionally, many families who are considered "at risk" do not have easy access to telephones. Both the staffing problems and the lack of access would limit the positive impact of this solution. Although this solution would address the problem to some extent, it was limited in effect and probably needed to be implemented in conjunction with some other solution. The solution of providing information network services also seemed to be a good one but included the same limitations previously discussed. Another limitation of this solution was that restraints on staff time resulted in personalized linkage and follow-up services difficult to provide on a consistent basis.

The writer further proposed that the solution of providing informal referral systems with information and training would also work in the writer's work setting. The administration would be supportive of this training and many teachers, based on informal comments and questions, seemed interested in having this information. Resources of staff time, materials, and training were available. However, this solution alone would not be sufficient to address the needs of the population for two reasons. First, not all parents choose to use teachers as sources of information. Second, some parents were not fully able to define their questions. Parents needed opportunities to encounter both people and materials which address situations similar to their own so that they can gain clarity of what information they want to explore.

A final proposed solution involved information sharing methods, such as newsletters and tapes. The writer believed that these methods would be feasible and

resources to develop these vehicles of information sharing were available. However, some parents either discard or are not able to read printed information. Some parents do not have video players. Tape recorders could be loaned to families so they could listen to the information, but this service could be offered on a very limited basis due to financial issues. The limitation of this solution, then, was similar to that of other proposed solutions. It meets the needs of a select group of the population and did not meet the needs of others.

Selected Solution

Most of the proposed solutions, in the opinion of the writer, fell short of adequately addressing the needs of the work setting and the population. The determination was then made that a combination of solutions was needed in order to adequately address the causes of the problem. The writer's solution, then, was to use the idea of the family resource center and include in that center the information and referral telephone line service, support group activities, and information sharing activities. The need for teachers to become better informed and referral agents was also addressed.

Report of Action Taken

Prior to the implementation of the solution strategy, namely, the establishment of a family resource center, hereafter known as the STAR (Sharing Training and Resources) Center, some preliminary work was necessary. The first task was to discuss the project with the immediate supervisor and present the concept to the ESE supervisor. The next step was to identify possible physical sites for the STAR center. After identification, these sites were visited, and the advantages and disadvantages of each locale documented. This site visit report was then presented to the supervisor for tentative selection. After this tentative selection, the project was presented to the principal of the selected site for final approval and input on the project. Upon this

approval, funding sources were identified and funding for needed materials secured. After completion of these activities, actual development of the STAR Center began.

The first step in the establishment of the STAR Center was to gather informational materials. This was accomplished by first developing a list of community agencies which serve families in various ways. Following this, agencies were contacted, informed about the intent of STAR Center, and asked to provide informational material about the agency's purpose. Information could be in the form of posters, brochures, and newsletters. Resource directories were also requested to help with individual referrals.

Materials, including books, toys, tapes, and videos, were selected and ordered. Selected materials address various aspects of development including physical and motor development, cognitive development, social-emotional development, discipline, speech/language development, and the special needs child. Materials about self development and parenting were also ordered. "User friendly" materials, such as audio and video tapes were ordered and equipment to preview these at the center was secured. Other "friendly" materials, including step by step skills development sheets which feature stick figures showing how to help children develop specific skills, and behavioral charts which include reinforcement stickers for working on specific discipline issues, were developed. These materials are easy to understand and are quick and simple for the parents to use. A copy of all disposable materials was maintained so that items could be replenished as necessary.

Following this, a display for agency material was set up. Categories for materials, such as economic assistance, support groups, etc., were established. Once informational material arrived, it was categorized and displayed. One original copy of all informational brochures was filed so that copies could be made as supplies were depleted. In order to maintain current information, agencies were regularly contacted

to determine if new material was available. The information center was set up so that families could self refer, thereby keeping with the center's underlying family centered philosophy.

Prior to the arrival of resource materials, other agencies which allow material checkout were consulted for information regarding checkout procedures and material checkout procedures were developed. As resource materials arrived, they were inventoried, categorized, and displayed. Each toy that arrived was matched with a learning activity and then displayed in the "Toys That Teach" center. The "Toys That Teach" center was a special area in which many toys, appropriate for children of various developmental ages, were displayed. Each toy had a brief description of what the child could learn from the toy and how parents can play with the child in order to maximize this potential. Activity books and brochures, such as activities to do with a preschool child, as well as activity bags with materials for creative projects, were also available. Parents could borrow the play materials to share what they have learned with their children. Parent suitcases, which provide several learning activities on a particular theme, were also available for checkout. Each suitcase featured a developmental theme, such as shapes, and presented several activities such as a matching shapes game, identifying shapes in the home, shapes to make a picture, a shape book, and detailed instructions on how to use these materials to teach the concept. Each case provided all the materials needed (for example, even the paper and glue to make the picture is included) to complete the activities. Parents also had opportunities to attend "Make and Takes." Make and Take programs provided opportunities for the relationship between play and learning to be explored through hands on activities . The intent of the Toys that Teach center was to enable parents to learn the relationship between play and child development.

Prior to opening the center, special environmental touches needed to be added.

These included posters and pictures, plants, and stuffed toys. The idea was to create a warm and comfortable environment, one visitors would like to come back to again and again. Far from being "niceties," these touches are essential when centers are located on school campuses since some parents have unpleasant memories associated with their school experiences. After both supplies and decor were in order, time to open the STAR center arrived. To present the center, separate "Open House" events were held for teachers and parents. These opening celebrations were announced through flyers sent home with the children, presentations at PTA meetings, and school announcements. During these events, the purpose of the center was explained, available materials were displayed , and check-out procedures detailed. Following open house events, additional public relations activities, which included informational flyers, presentations at meetings, and notices in parents' newsletters were undertaken throughout the course of the project.

Agencies were also contacted about the STAR Center. Information was shared with agencies through presentations at agency council meetings and information flyers. Word of mouth advertising was also used with agency personal when possible. During the course of this project, an Agency Day was held. Basically, this was an "Open House" event for agency staff. The primary focus of this event was what information a family an agency works with could find at the STAR Center and what additional material the agency could provide to the center. Agencies' staff were invited to this event through printed notices sent to both the agencies and to specific staff members who are involved in a district-wide family service inter-agency council.

Once the center was introduced, weekly hours of operation were maintained. During the operating hours of the center, a "Warm Line" was available for parents to call. This warm line was a confidential telephone service which provided support, information, and referrals for all family members. This line was to be answered by

both staff and trained volunteers. Since this line could not be answered at all hours, an answering machine provided additional phone numbers where assistance could be found. Parents could also leave messages to have the call returned.

Informational programs were also offered to parents and teachers. Topics included child development and play, Parents' Rights in Special Education and Section 504, and speech/language development. Some programs were offered during daytime hours while others were in the evening so as to attempt to accommodate parents' varying schedules. Information about these programs was sent home with students. Teachers and other agency personnel were informed about these programs through mailings. In addition to opportunities for parents to meet at informational programs, support group meetings were also held. The purpose of these meetings was to encourage parent to parent sharing and mentoring. Although the focus was primarily support for families, both informational speakers and teachers also attended these meetings. Initially, these meetings were orchestrated by the center's personnel. However, the writer's intention was that parent leaders would eventually assume responsibility for this group. In order to encourage attendance and a positive atmosphere, both child care and snacks were provided. After the first 2 meetings, parents were encouraged to bring snacks to share to foster participant ownership of this group.

Throughout the course of implementation, volunteers were requested to staff the center during hours of operation and for support group activities. Initially, personal requests were made to parents who frequently used the center or were actively involved as parent support persons. Teachers were also asked to contact parents who acted as classroom volunteers to spend some hours in the center. On a more general basis, flyers requesting volunteers were sent to parents.

The effectiveness of teachers as information providers was also addressed in

this project. Teachers were invited to attend FYI days to gain more information about available services. Teachers received a listing of community agencies, which included the agencies' purposes and criteria for service, in the teacher's newsletter. The teacher's newsletter, which featured an agency corner that provided a detailed look at a community agency and its services, also included a side bar of "Other agencies which provide this service" and contact phone numbers. A listing of support groups was also featured in several issues of the newsletter.

Although much of the original design for this project was implemented, some roadblocks and deviations from this plan did occur. Some of these deviations resulted from positive occurrences ; others from somewhat less than positive incidents. The first major deviation was that attendance was very sporadic, and on occasion, very sparse. On some occasions, programs and support group meetings were well attended; at other times only 2 or 3 parents would attend. Calls to the warm line were also limited. Although calls requesting referral information were received during hours of operation, no messages for call backs were left on the answering machine. This resulted in two deviations of the original concept. One was that less data was obtained than originally anticipated due to low attendance or parents not wanting to complete the forms, usually because of time issues. The other deviation was a very positive one. This change was that the program supervisor approved the establishment of "mini centers" throughout the district. Other staff members, excited about the resource center concept, joined the writer in establishing these "mini centers" . These centers had a smaller collection of books, toys, agency information, informational brochures, and parent suitcases. These centers were linked through the district's courier system so that material available at a different center can be sent to the parent's home school for pick-up. This deviation resulted in added convenience for the parents and also increased the amount of materials available at any one center.

This decentralization seemed to increase usage rates. The modification of adding mini-centers was enhanced by two unexpected yet pleasant events. These were the receipt of unexpected grant funds used to purchase additional materials and acquiring a large collection of books on varying topics. Another deviation which occurred was that several teachers were using the resources of the center for personal and classroom use. Additionally, they lent the materials to families they believed would benefit from them. Although this practice initially appeared to not support the family centered philosophy, these teachers did encourage the parents to visit the center themselves and see what was available. This encouragement did result in some self initiated visits to the center.

The second deviation of this plan occurred with parent volunteers. Although two volunteers were found through personal request to staff the center during hours of operation, both of these persons faced positive lifestyle changes and were unable to keep their commitment. Teachers were asked to contact parents who have acted as classroom volunteers to spend some hours in the center but this was not a successful approach. Flyers requesting volunteers were also unsuccessful. Efforts to recruit support group volunteers, however, were much more successful with members selecting meeting topics, providing snacks, and continuing parent to parent linkage outside of the meeting setting. Parents have not completely assumed responsibility for the support group as was originally hoped; however, movement in this direction is taking place. Parent volunteers have also begun plans for a resource and referral guide for parents. Although this guide is still in the planning stage, hopes remain high that this project can be completed by the end of the school year.

Another major deviation occurred in the plan which addressed the effectiveness of teachers as information providers. Although teachers did receive information about agencies and support groups in their newsletters and received a

listing community agencies, their purposes and criteria for service. This portfolio remains in the development stage. An additional deviation was that due to administrative opinion, teachers were asked to complete a survey of where to locate information rather than the measure for teachers regarding the referral of parents. This meant that rather than answering in a yes/maybe/no format, teachers had to respond with specific referral information.

Minor deviations also occurred during the implementation of this practicum. One was that instead of a roster of additional books on the subject inside each book, a catalog listing available books by topic is available for parents. This change helped to facilitate the sharing of books between centers. The second deviation was that no parent prepared a brief book summary. Although four parents stated they would like to develop summaries, no parents actually completed the task.

CHAPTER V

RESULTS, DISCUSSION, AND RECOMMENDATIONS

Results

The problem addressed through this practicum project was that families seek specific information about the physical, social-emotional and academic aspects of their child's life but had not acquired the skills and resources necessary for their search to be successful. The solution strategy implemented to address the causes of this problem was to develop a family resource center and include in this center information and resources, a telephone referral service, support group activities, and information sharing activities for both parents and teachers.

Specific outcomes were projected for this practicum. The first projected outcome was that of the estimated 50 parents encountered during the problem solving phase of this project, 25 will know with 75%accuracy where to find information on specific topics of interest as measured by a survey of where to locate information. This measure asked parents to list specific agencies which could provide information or services in 10 specific areas, namely, counseling, developmental delay, economic assistance, food, health care, housing, legal, medical, other agencies, and preschools. In order to earn 75% accuracy, participants had to correctly identify a minimum of 15 out of 20 possible responses. Of the 7 parents who completed this survey, 5 were able to identify where to find information with 75% accuracy.

Table 2

Participants' Scores on Measure of Where to Locate Information

Participant #	Score	Above or Below Cutoff Score (75)
1	100	Above
2	100	Above
3	90	Above
4	75	Above
5	75	Above
6	65	Below
7	50	Below

Since two respondents scored below the cutoff score of 75, this projected outcome was not met.

The second projected outcome was that 20 encountered parents will exhibit an understanding of how to use 50% of the information they acquire as measured by a survey regarding the utilization of acquired information. This measure used an 11 question yes/no format and asked questions regarding the effective use of information once it is obtained. Parents had to answer at least 7 questions correctly in order to demonstrate a minimum of 50% accuracy on this measure. Of the 10 measures obtained, all scores were 82% or above.

Table 3

Participant's Scores on the Utilization of Acquired Information Measure

Participant #	Percentile Score	Above or Below Cutoff Score of 50%
1	100%	Above
2	100%	Above
3	100%	Above
4	100%	Above
5	91%	Above
6	91%	Above
7	91%	Above
8	91%	Above
9	91%	Above
10	82%	Above

Since all participants scored well above the cut-off score of 50%, the second projected outcome for this project was met.

The third projected outcome for this project was that 30 parents will express an awareness of how to access information and referral services 75% of the time as measured by a survey regarding effective access of community resources. This measure of 10 questions which uses a yes/no format attempted to determine if information acquisition skills had been acquired. Although this outcome measure was answered by a lesser number of participants than originally anticipate, 9 out of 10 obtained scores were above the minimum projected cutoff score.

Table 4

Participant's Scores on How to Effectively Access Community Resources Measure

Participant #	Percentile Score	Above or Below Cutoff Score of 75%
1	100%	Above
2	100%	Above
3	100%	Above
4	100%	Above
5	100%	Above
6	100%	Above
7	100%	Above
8	90%	Above
9	90%	Above
10	70%	Below

This projected outcome was not met because participant #10 scored below the projected cutoff score of 75%.

The fourth projected outcome was that 15 parents will provide a specific example of how obtained information was utilized as measured by the survey of information usage. This measure asked the participants to identify the reason(s) they visited the resource center and to comment about how they used the information they received.

Table 5

Participants' Responses on How Obtained Information Was Used

Participant #	Reason for Visit	How Used Information
1	See what was available Borrow toys	With own children; In classroom; share with other parents
2	See what was available Borrow books and toys	Use toys with children Refer parents
3	See what was available Borrow toys	Use toys with children Refer parents
4	See what was available Borrow books and toys	More play with child
5	Attend a program	Understand that my child is on the right road
6	Borrow books	Used in a presentation
7	Borrow books	Learn more about my child's disability and what to expect
8	Support group meetings	Realize I'm already doing what I need to do for me and my family. This group is not for me as I felt more frustrated.
9	Borrow books/ Info. re. agencies/programs	Used resource info. and books for course I'm taking
10	Borrow books/toys Attend program	Gained additional insight/info re. my child

	Support group	Learned more about play Helped others
11	Borrow books	Learned about other services. Info to work with my child. Support to be an advocate
12	Borrow books/ Support group meetings	Learned about and followed through on resources to help me child
13	Borrow books/ Support group meetings	Used suggested services to look into possible different diagnosis for my child
14	Borrow books/ Support group meetings	Not sure yet
15	Borrow books/ Support group meetings	No response

Since 15 center users were able to provide a specific example of how they used obtained information, this projected outcome measure was met.

The fifth projected outcome measure was that 15 parents will show a 3 point increase in ability to judge developmental appropriateness of the materials and services they acquire as measured by a pre and post survey measure of developmental appropriateness. This 18 question measure uses a true/false format and attempts to solicit obtained knowledge about developmental appropriateness. Questions were developed after review of current literature on best practices in the area of child development. Five parents actually completed this measure; their scores did not reflect a 3 point increase.

Table 6

Pre and Post Test Scores on the Measure of Developmental Appropriateness of Materials and Services

Participant #	Scores Pretest	Post-Test	Difference
1	100	100	0
2	100	100	0
3	94.5	100	5.5
4	94.5	94.5	0
5	83.5	89	5.5

Although two participant's scores did reflect an increase greater than 3 points, a majority did not demonstrate an increase and so this objective was not met.

The sixth projected outcome was that 10 informal referral sources, in this case teachers who frequently provide referral information, will demonstrate an awareness of where to refer parents 50% of the time as measures by a survey for teachers regarding the referral of parents. Due to administrative request, outcome data was collected through the survey of where to locate information rather than the survey for teachers regarding the referral of parents. Although teachers were to originally answer questions in a yes/maybe/no format, this survey asked teachers to identify 2 specific resources in 8 areas, namely, economic, child development, behavior, health/medical, legal, mental health, educational legal rights, and support groups. So as to score 50%, teachers had to identify 8 out of a possible 16 sources. All ten respondents were able to identify at least one appropriate referral in each category.

Table 7

Teachers' Scores on Measure of Where to Locate Information

Participant #	Score	Above or Below Cutoff Score (50)
1	100	Above
2	100	Above
3	100	Above
4	100	Above
5	90	Above
6	85	Above
7	85	Above
8	85	Above
9	80	Above
10	75	Above

Since scores were above the projected cutoff score, this projected outcome was met.

The seventh and final projected outcome was that 15 parents will report feeling a 40% increase in support of their attempts to exercise their right to know as measured by a survey of perceived increased support regarding right to know issues. This measure used a 5 question agree/disagree format to elicit parents' perception of support after participation in center activities. Fourteen out of 15 parents perceived a 100% increase; one parent reported 80%.

Table 8

Participants' Report of Increase of Support Regarding Exercise of Right to Know Issues

Participant #	Report Measure	Above or Below Cutoff Score (40%)
1	100	Above
2	100	Above
3	100	Above
4	100	Above
5	100	Above
6	100	Above
7	100	Above
8	100	Above
9	100	Above
10	100	Above
11	100	Above
12	100	Above
13	100	Above
14	100	Above
15	80	Above

Since all reports were above the projected 40% outcome score, this outcome is considered to be met.

Discussion

Four out of the seven projected outcomes were met. This means that the projected outcomes of parents understanding how to use acquired information, feeling increased support, and citing specific examples of information utilization were successfully met. Additionally, the outcome regarding teachers demonstrating an awareness of appropriate community referrals was also successfully completed. Three projected outcome were not met. These objectives would probably have been successfully completed if more parents had participated in the project.

This lack of participation leads to the question of why did so few parents choose to participate. Three reasons seem to emerge. The first reason is that the need for information has to be greater than the personal cost of the search. For many families, this means the situation which requires intervention must be of almost crisis proportion before assistance is sought. Then, as the family system again reaches equilibrium, as any system will eventually do, the need to search for assistance becomes a lesser priority. This is not to say that families are uncaring or uninterested in the lives of their children. Indeed, many parents fully intend to participate. However, other family priorities, such as economics, activities of daily living, and recreation, outweigh the "extra" activities and therefore take precedent. There is a continual need for information systems and educational programs because there will always be some families at "crisis point". However, professionals would be unrealistic to believe that any family will remain highly involved for a long period of time or that a large number of families will make information searches a priority at any given time.

The second reason for limited participation appears to be that some participants "out grow" the system. Certain individuals, because of their intense involvement, move beyond what a particular group can offer into mentoring, advocacy, or professional avenues. Often times, these individuals use skills developed and nurtured by the

support system. This process of "out growing" is actually a very positive effect of any program in that the system supported and encouraged the individual to a level of confidence where new challenges could be explored.

A third reason for limited participation seems to be related to the concept of readiness. Some parents truly believed they wanted to understand their child's disability, or begin a new system of discipline, or work with their children on developmental tasks, or tackle whatever the family's issues may be. After exposure to information or resources, however, they found themselves or their entire family system, was not ready to make the necessary changes. Although they have reached a level of awareness, as evidenced by the desire to find information, the commitment to change had not yet emerged. Since change within a system is a process rather than an event, the writer surmises that most families will eventually reach the commitment stage and cautions professionals to be both patient and supportive during this process.

In the opinion of the writer, this practicum project was a successful experience and successfully addressed the problem of families seeking specific information but not having acquired the resources necessary for their search to be successful. Although continued work is needed to address this problem, the solutions applied in this practicum project appear to be excellent starts at remediating the discussed causes of this problem.

Other projects designed to address the project's problem have met with successful results. Meunchow and Sharp (1980) in review of the Head Start family involvement program, found that the child and family resource program, a center for child and family services, led to an increased awareness of child development, reduced familial isolation, and resulted in continued parental involvement. Bloch and Seitz (1985) in review of a family exchange center, reported that parents

demonstrated an increase in advocacy and "watchdog" activities and showed a general increase in involvement. Finally, Caro and Derevensky (1991) found that parents involved in a family focused intervention model showed an increase in both their awareness of child development and in the acquisition of familial skills.

The results obtained by the writer, as well as those found by others who implemented solution strategies, show that family centered solutions have a positive impact on families. Some strategies, however, seem to work more effectively than others. These strategies included support group meetings, information sharing with teachers, and providing resources to be borrowed. Support group meetings seemed to work well because parents could "drop in" when they felt a need but were not required to make a commitment to the group. This meant parents could get the information they wanted, or discuss their priority problems, without feeling pressured to continue participation in the group. Additionally, some relationships continued outside the setting of the meetings and provided opportunities for individuals to share and grow. Some parents needed one to one support and were greatly helped by these alliances.

Information sharing with teachers also worked well. Teachers seem to prefer having resources readily available. Teachers do not have time to search for information but do not seem comfortable asking parents to call someone else for assistance. This discomfort seems due to the teachers' fears that many parents will not follow through or that the referral agency will not fully understand the families' needs. Teachers, however, are in the best position to gain understanding of the families' needs, and can be insightful and influential advisors to families. Teachers disseminating information also provided opportunities for follow through activities with the families. Since teachers simply do not have the time to handle additional training and responsibilities, information sharing with teachers must be provided via quick

and easy formats.

A third strategy which seemed to work well is the system which allowed parents and teachers to borrow materials. This system, however, must be very simple and convenient for parents to access. Often times, parents will not want or have time to visit a center but will request materials through telephone conversations or notes to teachers. Lending system must be accessible enough to accommodate even the busiest of parents.

Some strategies did not work very well and may not be worth continuing. The first of these strategies is the use of a "warm line" to provide information. Although some parents used this system, many others probably could not call during hours of operation or felt uncomfortable leaving messages. Person to person systems seemed better utilized for information sharing, possibly because some trust had developed. The telephone system however, worked well for resource sharing and should be continued. Specific "info days" also did not elicit as great a level of participation as anticipated. The reasons for this appear to be that parents did not have a particular immediate interest in the topic area or were committed to other priorities. Again, the factor of need versus personal cost serves as a possible explanation. Although "info days" were said to be both enjoyable and beneficial to those who attended, the commitment of staff time and resources to these presentation seems greater than the perceived benefit.

Considering the drawbacks in providing resources and information to parents, one must ask if there are effective ways for schools to address this issue, or if the issue is simply too big for schools to tackle. Despite the occasional frustrations and disappointments, the writer believes that the education system is charged with the responsibility of finding new and effective ways to provide information and resources to parents. In the writer's opinion, the educational system must include two

components in the information delivery system in order for the system to be more accessible and hopefully more effective. The first component is to develop extremely simplified systems. For example, schools can send home catalogs of available video and audio tapes parents can borrow. Another example would be for schools to send home information sheets about a specific topic and include resources the school could loan to parents. Parents could request materials via the telephone or through notes delivered by their children. Schools can also address this issue by forming partnerships with businesses. Educators can encourage businesses to host information programs on topics of child development and provide expertise for these presentations. Businesses can also be encouraged to give parents one hour a month to visit their child's school, to learn about the curriculum, available resources, and other important issues. Once education and business form partnerships on these issues, parents will have both the time and motivation to make involvement worthwhile.

Recommendations

Based on the insights gained from the implementation of this project, the following recommendations are offered:

1. Establishment of "Mail in" resource centers. Parents would be made aware of available resources and be able to request materials by mail, telephone, fax, or if available, the agency's courier system. The writer and co-workers will pilot this recommendation through use of the school district's courier system. Perhaps if this method is successful, additional access methods will be added to the exchange system.

2. Teachers establishing mini resource centers in their classroom. Parents would have many opportunities to check out material and to contribute information to the center. Teachers could trade resources among themselves in order to increase the amount of available material.

Dissemination

Present plans to disseminate this practicum project include sharing the obtained information with the teachers through the teachers' newsletter and to share with the personal of other agencies through a presentation at agency council meetings. The writer also desires to share this project at professional conferences and through appropriate professional publications.

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APPENDIX A

THE FAMILY NEEDS SURVEY (REVISED, 1990)

Appendix A

FAMILY NEEDS SURVEY (Revised, 1990)

Child's Name: _____ Person Completing Survey: _____
Date Completed: _____ Relationship to Child _____

Dear Parent:

Many families of young children have needs for information or support. If you wish, our staff are very willing to discuss these needs with you and work with you to identify resources that might be helpful.

Listed below are some needs commonly expressed by families. It would be helpful to use if you would check in the columns on the right any topics you would like to discuss. At the end there is a place for you to describe other topics not included in the list.

If you choose to complete this form, the information you provide will be kept confidential. If you would prefer not to compete the survey at this time, you may keep it for your records.

TOPICS	NO	NOT SURE	YES
Information			
1. How children grow and develop			
2. How to play or talk with my child			
3. How to teach my child			
4. How to handle my child's behavior			
5. Information about any condition or disability my child might have			
6. Information about services that are presently available for my child			
7. Information about the services my child might receive in the future			
Family and Social Support			
1. Talking with someone in my family about concerns			
2. Having friends to talk to			
3. Finding more time for myself			
4. Helping my spouse accept any condition our child might have			
5. Helping our family discuss problems and reach solutions			
6. Helping our family support each other during difficult times			
7. Deciding who will do household chores, child care, and other family tasks			
8. Deciding on and doing family recreational activities			
Financial			
1. Paying for expenses such as food, housing, medical care, clothing or transportation			
2. Getting any special equipment my child needs			
3. Paying for therapy, day care, or other services my child needs			
4. Counseling or help in getting a job			
5. Paying for babysitting or respite care			
6. Paying for toys that my child needs			

TOPICS	NO	NOT SURE	YES

Explaining to Others

1. Explaining my child's condition to my parents or my spouse's parents
2. Explaining my child's condition to his or her siblings
3. Knowing how to respond when friends, neighbors, or strangers ask questions about my child
4. Explaining my child's condition to other children
5. Finding reading material about other families who have a child like mine

Child Care

1. Locating babysitters or respite care providers who are willing and able to care for my child
2. Locating a day care program or preschool for my child
3. Getting appropriate care for my child in a church or synagogue during religious services

Profession Support

1. Meeting with a minister, priest, or rabbi
2. Meeting with c counselor (psychologist, social worker, psychiatrist)
3. More time to talk to my child's teacher or therapist

Community Support

1. Meetings and talking with other parents who have a child like mine
2. Locating a doctor who understands me and my child's needs
3. Locating a dentist who will see my child

Other. Please list other topics or provide any other information that you feel would be helpful to discuss.

Thank you for your time.
We hope this form will be helpful to you in identifying the services that you feel are important.

The Family Needs Survey was developed by Donald B. Bailey, Jr., PhD., and Rune J. Simeonsson, PhD. For further information, write the authors at the Frank Porter Graham Child Development Center, CB#8180, University of North Carolina, Chapel Hill, NC 27599. Reprinted with permission. (c) 1990, Donald B. Bailey, Jr. and Rune J. Simeonsson. Note: This revision of The Family Needs Survey was based on a survey of parents concerning their perception of the measure and on a factor analysis of the instrument. Copies of the instrument may be made for clinical and research purpose , so long as its source is cited.

APPENDIX B

LETTER OF CONSENT FOR USE OF FAMILY NEEDS SURVEY

We give permission for Mary M. Stowers to use the Family Needs Survey as a means of identifying needs of families of special needs students and using the obtained data in a practicum project.

signature	6/29/92 date
signature	date

APPENDIX C

SURVEY REGARDING WHERE TO LOCATE INFORMATION

Appendix C

Where to Locate Information

Dear Parent:

By completing this survey, you are helping our center identify what information families know about services in our community and what information still needs to be shared . Please take a few minutes and complete this form. Upon returning this survey to center staff, you will receive a special thank-you gift.

Survey

List two places you could contact to get information about :

Counseling	_____	_____
Developmental Delays	_____	_____
Economic Assistance	_____	_____
Food	_____	_____
Health Care	_____	_____
Housing	_____	_____
Legal Issues	_____	_____
Medical Issues	_____	_____
Other Agencies	_____	_____
Preschools	_____	_____

APPENDIX D

SURVEY REGARDING UTILIZATION OF ACQUIRED INFORMATION

Appendix D

Survey Regarding Utilization of Acquired Information

Now that you have listed where to find information, please take a few more minutes and tell how one best uses information by answering these questions **true** or **false**. (By the way, there are no right or wrong answers. Just tell us what you think.)

1. _____ Know my rights and the rights of my children.
2. _____ Be sure I communicate effectively which means to say what I mean and listen to what is said to me.
3. _____ Be prepared to fight, just for the sake of fighting.
4. _____ Develop a partnership attitude -- Believing that the professionals I meet want to work with me as a team.
5. _____ Change the information I gained and still expect it to work the way the professional said it would.
6. _____ Ask questions, as many as I need to, until I fully understand the information I found.
7. _____ Give up looking for information if I don't find it after 2 OR 3 tries.
8. _____ Use my judgment when getting information : Using what makes sense in my situation and disregarding the rest.
9. _____ Realize that professionals' opinions may conflict with each other or that their opinions can be wrong.
10. _____ Be sure I know what was said : Take notes or tape record.
11. _____ Share what I know. The best way to affirm what we know is to teach it.

APPENDIX E

SURVEY OF HOW TO EFFECTIVELY ACCESS COMMUNITY RESOURCES

Appendix E

How to Effectively Access Community Resources

(Is distributed with Appendices C and D).

(Take a deep breathe--- Almost finished !) Now that you told us how to find and use information, please complete this survey by answering **True** or **False** to these questions about the best way to approach community agencies so as to get what you want.

1. _____ Once you find out who to call, call as soon as you can.
2. _____ Have a list of questions ready prior to calling.
3. _____ If all your concerns were not addressed the first time, feel free to call back as many times as you need to.
4. _____ Trust your memory as to what you were told.
5. _____ Ask what paper and information you will need to bring with you to an appointment.
6. _____ Never ask to speak to a supervisor.
7. _____ Write down the name of every person you speak to.
8. _____ Act on the information you were given. If you were given incorrect information, call back.
9. _____ If the agency you called can't help, ask if they know an agency which can.
10. _____ If you are told you can't see your child's records, accept that as true.

Thank you for completing this survey. Please return this survey to a center staff person and receive your thank you gift.

APPENDIX F

SURVEY OF INFORMATION USAGE

Appendix F
Survey of Information Usage

Please Check All That Apply :

You visited the Resource Center to:

_____ See what was available
_____ Check out books
_____ Find out about agencies and programs
_____ Borrow toys
_____ Attend a program and/or hear a speaker
_____ Attend a support group meeting

In the space below, briefly tell us how you used the information you obtained at the resource center.

APPENDIX G

PRETEST/POSTTEST REGARDING

DEVELOPMENTAL APPROPRIATENESS

OF MATERIALS AND SERVICES

Appendix G

Pretest/Posttest Regarding Developmental Appropriateness of Materials and Services

The following is a brief questionnaire to check your knowledge about judging if a material or service is right for use with your child. (**On Posttest Only** : When you finish this quiz, you'll be given a score sheet so you can how you did!)

Please mark the following items **True or False** :

1. _____ Children's development involves many different areas, like motor, speech, language, and learning and children advance at different rates in different areas. For example, a child may be advanced in speech and slower in motor activities.

2. _____ Since a child develops at different rates in different areas, I can try to be aware of where my child is in each area and provide materials right for that stage.

3. _____ Play also develops in stages, namely, functional (using objects to see what they do), constructive (making things), and imaginative (pretending).

4. _____ A good rule of toy selection is to know what play stage my child is in and buy toys right for that stage. Buying 1 or 2 toys in another stage is also a good idea to encourage development in that area.

5. _____ A rattle is a good toy for children who are using toys to see what they do (functional play).

6. _____ Clay and blocks are good toys for children who are in the making things stage (constructive play).

7. _____ Even though a toy's box may say this toy is right for a certain age child, that doesn't mean its right for my child.

8. _____ Games with rules are usually too frustrating for children under age 7.

9. _____ Dolls and dress up clothes are good toys for children who are in the dramatic play (pretending) stage.

10. _____ Good toy choices will challenge my child but not be so difficult as to frustrate my child.

11. _____ Reading materials are best when they match my child's attention span.

12. _____ Play with others is the best way to learn and practice social skills.

13. _____ Although children can learn to recite rote information like the alphabet,this is only memorization, not true learning. Materials or programs which encourage this type of learning are not developmentally appropriate.

14. _____ Children really learn by doing.

15. _____ Toys which require only passive participation, such as listening or watching, do little to promote learning in children.

16. _____ Toys which promote imagination and creativity (i.e. paint and dress up clothes) are more developmentally appropriate than toys which entertain (i.e. computers, story-telling bears).

17. _____ The more a toy cost, the better it is for my child's development.

18. _____ An appropriate learning environment (such as preschool) teaches skills through play rather than sit down activities.

19. _____ Appropriate materials on discipline emphasize the

importance of giving children options and providing opportunities to learn to make choices.

20. _____ Materials which teach discipline techniques that stress basic human values such as respect, trust, and valuing a child's self esteem are developmentally appropriate for a child of any age.

APPENDIX H

ANSWER KEY TO

PRETEST/ POSTTEST REGARDING

DEVELOPMENTAL APPROPRIATENESS

OF MATERIALS AND SERVICES

Appendix H

Answer Key to Pretest/Posttest Regarding Developmental Appropriateness of Materials and Services

1. **True.** All children develop at different rates in different areas. Use activities that will challenge the child in areas in which the child excels and use materials which will help develop new skills in the weaker area without frustrating the child. Never emphasize an area or make it an area of focus. Concern yourself with the development of your whole child.

2. **True.** Try to determine what developmental stage your child is in for the areas of development. If your not sure, ask your child's teacher or call your local school.

3. **True.** All children develop play skills in stages. Even when children enter a new play stage, however, they will still engage in some play in the other play stages, too.

4. **True.** Buy toys which best match the current interest of your child. However, occasionally buy play materials that stimulate other types of play so that your child will develop play skills in all areas.

5. **True.** Functional play means using a toy to see what the toy does and what effect the child can have on the toy (This is why a young toddler will pull your earring : to see what will happen next!). Functional play is very important for the understanding of cause and effect relationships (such as "I pull this earring, mommy screams") and seeing one's action as producing a result (such as "I say 'Mama' and Mommy smiles").

6. **True.** Children in the constructive play stage are developing both their motor skills and their imagination. Offer children a wide variety of constructive play materials, old newspapers for gluing strips, pieces of yarn, old shoe boxes for building. Materials do not need to be expensive to be useful in encouraging constructive play.

7. True. Children move through play stages at their own pace and may not be ready for a toy when the toy manufacturer says. Play with your children and be patient : Your children will be ready when the time is right for them.

8. True. Although many game manufacturers would like you to think otherwise, the ideas of having to wait for a turn, move in a specific direction, and follow instructions are often too complex and frustrating for children younger than 7.

9. True. Pretend play expands a child imagination, language skills, and social skills. Materials found around the home, such as old telephones, old clothes and jewelry, pots and pans, make wonderfully creative and inexpensive pretend play items.

10. True. Good toys choices will hold your child's interest. Your child, however, must experience success with these toys are frustration will occur. If your child becomes frustrated with a toy, simply put it away for awhile and reintroduce it in a month or two.

11. True. Choose reading materials that require the child to sit and attend only for a period of time that is comfortable for the child. Often books which are very simple, with few words per page and colorful pictures, are good choices. Once you determine what your child's attention span is, you can choose a book that requires a bit more attention from your child, but make this increase very small (like 20 to 30 seconds). Ask your child simple questions about what you are reading to see if the book really does interest your child.

12. True. Play with others is the best way to learn how other people behave and how to get along with others. Through play, we learn to share, resolve conflict, express our thoughts, and listen to the thoughts of others. Encourage play for your children.

13. True. Developmentally appropriate preschool programs use play and creative exploration, not pencil and paper tasks or

memorization, as teaching tools. For more information on this subject, see Good Teaching Practices for 4-and 5- Year by the National Association for the Education of Young Children.

14. **True.** Researchers who study children find time and time again that children learn by doing.

15. **True.** Since children learn by doing, passive participation, which requires very little *doing* by the children, results in very little learning.

16. **True.** Again, when children are encouraged to use their imagination and creativity, they become active participants and gain the advantage of learning by doing.

17. **False.** Many items which inspire imagination and creativity can be found around your home at very little cost. Many expensive toys entertain rather than inspire and do little to promote learning in your children.

18. **True.** See the answer to question 13.

19. **True.** Discipline means to teach the child something. When you offer choices to the child, you teach both how to make choices and what the most appropriate choices for the situation are. This type of discipline fosters self responsibility.

20. **True.** A child who is treated with these basic human values, especially in times of conflict, tends to treat both him/her self and others with these same values.

APPENDIX I

SURVEY FOR TEACHERS REGARDING

REFERRAL OF PARENTS

Appendix I

Survey for Teachers Regarding
Referral of Parents

Since receiving information on how to refer parents to community agencies, I feel an increased confidence in where to refer parents for :

Economic Issues	Yes	Maybe	No
Child Development Issues	Yes	Maybe	No
Behavioral Issues	Yes	Maybe	No
Health/ Medical Issues	Yes	Maybe	No
Legal Issues	Yes	Maybe	No
Mental Health Issues	Yes	Maybe	No
Legal Rights (Educational)	Yes	Maybe	No
Support Groups	Yes	Maybe	No

APPENDIX J

MEASURE OF PERCEIVED INCREASED SUPPORT

REGARDING RIGHT TO KNOW ISSUES

APPENDIX J

MEASURE OF PERCEIVED INCREASED SUPPORT
REGARDING RIGHT TO KNOW ISSUES

CHECK ALL THAT APPLY :

_____ I HAVE VISITED THE RESOURCE CENTER

_____ I HAVE USED RESOURCE MATERIALS /OTHER SERVICES

_____ I HAVE ATTENDED RESOURCE CENTER INFORMATION PROGRAMS

_____ I HAVE ATTENDED SUPPORT GROUP MEETINGS

Circle your reply :

SINCE VISITING THE RESOURCE CENTER :

1. I am more aware of my right to know information about my child from professionals sources, such as schools, doctors, counselors.

Agree Disagree

2. I feel braver about talking to professionals, asking questions, etc.

Agree Disagree

3. I now ask professionals more questions.

Agree Disagree

4. I feel supported by other parents and/or staff in my attempts to get information from professionals.

Agree Disagree

5. I am now more aware that I must be an advocate for my child.

Agree Disagree